

EMPLOYMENT INQUIRY

STD. 628 (REV. 4-96) REVERSE

INFORMATION REGARDING YOUR ELIGIBILITY

So that we may know if you wish to be considered for possible appointment to the position in the class described on the reverse side of this form, **please complete both copies of this form and return one copy by the date indicated**. **PLEASE KEEP ONE COPY OF THIS FORM FOR YOUR RECORDS.** Any expenses you may incur in seeking appointment are strictly your responsibility.

The following are possible actions which may result from this inquiry and may impact your employment availability:

1. If you are unavailable for an interview within seven (7) calendar days from the indicated return date in the top portion of this form, it may be considered a waiver of employment. Failure to respond by the indicated return date may be considered a waiver of employment and will result in your name being placed on inactive status. (INACTIVE status means your name will **NOT** appear on subsequent certification lists used by hiring departments.)
2. If a copy of this form is returned with your wish to be considered for the position by the indicated return date, **and if you do not hear from us within a reasonable amount of time (3 - 4 weeks), you may assume that the position has been filled by the appointment of another eligible person.** Your name will remain on active status for future employment consideration. You may, if you wish, contact the department to verify receipt of a copy of this form and the status of the position.
3. If a copy of this form is returned with your wish **NOT** to be considered for the position by the indicated return date, your name will remain on active status for future employment consideration. **NOTE:** Your name will be placed on inactive status permanently when you have declined any combination of three (3) job inquiries from an OPEN eligible list.
4. If you are being contacted from a PROMOTIONAL list, or a REEMPLOYMENT list, or a LEAP list, or a STATE RESTRICTION OF APPOINTMENTS list, your name will remain on active status regardless of the number of times you decline job inquiries provided your response is received by the indicated return date.
5. Limited Employment Appointment Process (LEAP) candidates may only choose from the Limited Term options. If you have previously indicated an interest in Full Time employment and you accept a Part Time or Intermittent appointment, your name will continue to be considered for Full Time positions.

NOTE: No one is to make requests or statements that can be considered as asking or instructing eligibles to go inactive or waive a position. (Government Code Sections 19681(c) and 19682.)

SIGNATURE



DATE

COMPLETE THIS SECTION FOR CHANGE OF INFORMATION ONLY (Print or Type)

NEW ADDRESS (Number & Street)

CITY

STATE

ZIP CODE

HOME TELEPHONE

OFFICE TELEPHONE

CHANGE NAME TO:

EMPLOYMENT INQUIRY

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- IMPORTANT -

Your name will be placed on INACTIVE STATUS for this classification if a copy of this form is not returned postmarked no later than:

SEND REPLY TO

INQUIRY DATE

CERTIFICATION NUMBER

CLASS CODE

CLASSIFICATION

TO:

POSITION LOCATION

LIST TYPE

SALARY RANGE

PER

TIME BASE

STATE DEPARTMENT

TENURE

TELEPHONE NUMBER

LEAP JOB EXAMINATION PERIOD

TELEPHONE NUMBER:
CALIFORNIA RELAY SERVICE

YOU ARE BEING CONTACTED BECAUSE YOUR NAME IS DESIGNATED AS ONE OF THE PERSONS WHO:

ADDITIONAL INFORMATION

PLEASE READ REVERSE SIDE BEFORE COMPLETING THIS SIDE

*If you **ARE** interested in the position described above, please complete the following.*

- ☐ **YES** - I am interested in being considered for possible appointment to this position. I have attached my completed application (STD. 678) to this copy for your consideration. *(If you are unavailable for employment within 30 days from the date of job interview, it **MAY BE** considered a waiver for this position.)*
- ☐ Check this box if you are disabled and will require reasonable accommodation in the event you are scheduled for an interview.

*If you are **NOT** interested in the position described above, please complete the applicable items below.*

1. ☐ **NO** - I am not interested in being considered for this position but wish to remain on active status for future employment vacancies.
2. Check one or more tenure and time base preferences. If you check both permanent and limited term and receive a limited term appointment, your name will continue to be certified for permanent positions. *LEAP CANDIDATES -- READ PARAGRAPH NUMBER 5 ON REVERSE SIDE BEFORE SELECTING OPTIONS.*
- I AM AVAILABLE ONLY FOR:
- | | | |
|---|---|--|
| <input type="checkbox"/> PERMANENT -
FULL TIME | <input type="checkbox"/> PERMANENT -
PART TIME | <input type="checkbox"/> PERMANENT -
INTERMITTENT |
| <input type="checkbox"/> LIMITED TERM -
FULL TIME | <input type="checkbox"/> LIMITED TERM -
PART TIME | <input type="checkbox"/> LIMITED TERM -
INTERMITTENT |
3. I AM NOT INTERESTED IN POSITIONS IN THIS CLASS.
- ☐ Please place my name on inactive status for this class. I understand that I may request to have my name restored to active status at a later date provided I still have list eligibility.
- ☐ I have accepted employment in this class with:
- (State Department Name) (Employment Date)
- ☐ Please place my name on inactive status. I have been appointed to the class listed below:
- (Class Title) (Appointment Date)
4. I DO NOT WISH TO WORK IN THE LOCATION INDICATED ABOVE. PLEASE REFER MY NAME ONLY FOR THE FOLLOWING LOCATION(S):
5. OTHER (Explain)
- ☐

NOTE - As a result of changes in your location and/or tenure and time base choices, your name will not be deleted from any certification list(s) which may already have been issued prior to this request being processed. Therefore, you must continue to reply to contacts resulting from those certification list(s). **FAILURE TO REPLY WILL PLACE YOUR NAME ON INACTIVE STATUS.**